

Work Order ID 92217

Tuesday, October 23, 2012 11:25:57 AM

92217

Page 1

Item ID: PB67-43001-277 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Contoured Male Eye
 Start Date: 10/23/2012 Start Qty: 4.00 ***4*** Cust Item ID:
 Required Date: 11/9/2012 Req'd Qty: 4.00 ***4*** Customer:
 Reference:

Approvals: Process Plan: MF Date: 12-10-23 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr •	Revision Nbr								
B67-43001	C								
100		0.00							
100	BAND SAW								
Bandsaw	Memo	0.00							
Jeaspa Bandsaw	Cut blanks: 1.250" x 1.250" x 2.250" long								
110		0.00							
110	HAAS CNC VERTICAL MACHINING #1								
HAAS 1	Memo	0.00							
HAAS CNC vertical machine #1	Machine as per Folio FA544 and Dwg B67-43001								
	Identify as B67-43001-277								
	Dwg Rev _____								
	Folio Rev <u>MF</u>								
	Manually tap part as per Dwg B67-43001								
	Deburr								

FK 12/10/24

24, 240.25



PTO

NCR: ☒ Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: SWA Date: 12/11/02QA Closed: SWA Date: 12/11/02

Work Order: <u>92217</u>	DISPOSITION Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS			
Part No. <u>1367-4300/-277</u>		Skid-tube <input type="checkbox"/> Machining <input checked="" type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
NCR No. <u>12-1957</u>					

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube		General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input checked="" type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	
		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input checked="" type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 92217

Tuesday, October 23, 2012 11:25:57 AM

92217

Page 2

Item ID: PB67-43001-277

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Contoured Male Eye

Stop

NS2

Start Date: 10/23/2012 Start Qty: 4.00

4

Cust Item ID:

Required Date: 11/9/2012 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

120

QC2- Inspect parts off machine FAI/FAIB

0.00

120

QC

Memo

0.00

Quality Control

130

QC8- Inspect parts - second check

0.00

130

QC

Memo

0.00

Quality Control

140

Identify as per dwg & Stock Location:

0.00

140

Packaging

Memo

0.00

Packaging

EP

12-10-25

3

1

DAS
04
2-83

DAS
25
9-83

12-10-28

3

3x

12-10-29

Work Order ID 92217***92217***

Page 3

Tuesday, October 23, 2012 11:25:57 AM

Item ID: PB67-43001-277

Accept

N900040100Setup Start ***NS1***

Revision ID:

Item Name: Contoured Male Eye

Stop ***NS2***

Start Date: 10/23/2012 Start Qty: 4.00

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Cust Item ID:

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Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

150

QC21- Final Inspection - Work Order Release

0.00


150

QC

Memo

0.00

Quality Control

12/10/31 MF
(2-11-01)

Picklist Print

Tuesday, October 23, 2012 11:25:57 AM

Page 1

Work Order ID: 92217

Parent Item: PB67-43001-277

Start Date: 10/23/2012

Required Date: 11/9/2012

Parent Item Name: Contoured Male Eye

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP A05.07.19New issueKJ/JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M6061T6B1.250X01.250		Purchased	No			100	f	18.4484	0.1875	0.7894737			
6061-T6 Bar 1.25 x 1.25													

Location

Loc Qty

Loc Code

MAT003

12

122521

12

MAT004

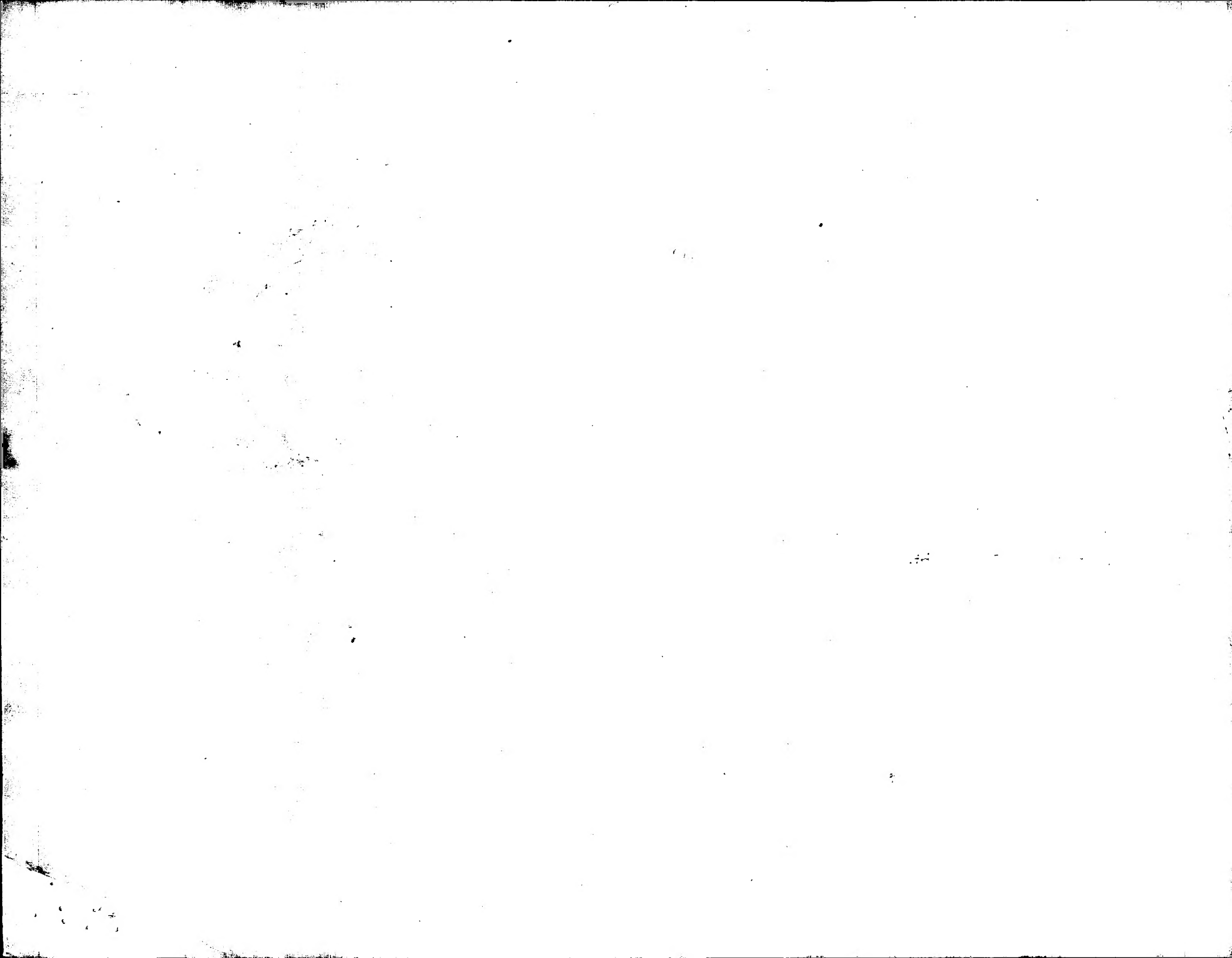
6.4484

119318

6.4484

0.79



F.K. 12/10/24



DART AEROSPACE LTD		Work Order: 92217
Description: 7367-43001-277		Part Number: Conductor vial cap
Inspection Dwg:	Rev:	Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
2.66	+/- .030	2.66	/			
1.35	+/- .030	1.350	/			
2.13	+/- .030	2.125	/			
.25	+/- .030	.253	/			
.85	+/- .030	.850	/			
.30	+/- .030	.300	/			
.75	+/- .030	.746	/			
10-32 UNF	2B	2B	/			
X 1.200 ID	+/- .010	1.200	/			
.700	+/- .010	.702	/			
.313	+/- .0060 + .001	.315	/			
.425	+/- .010	.426	/			
2.00	+/- .030	1.990	/			
.400	+/- .010	.402	/			
.25	+/- .030	.250	/			
1.00	+/- .030	1.001	/			
R.25	+/- .030	.25	/			
.110	REFERENCE ONLY (SLOT)		/			
.260	REFERENCE ONLY (SLOT)		/			

Measured by: [Signature] 	Audited by: 25 	Preliminary Approval:
Date: 12-10-25	Date: 12-10-20	Date:

Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	

10.04.15

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; font-size: small;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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8

7

6

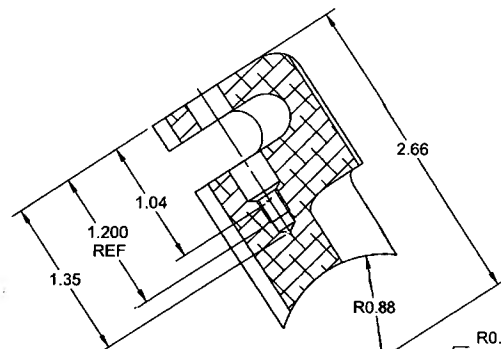
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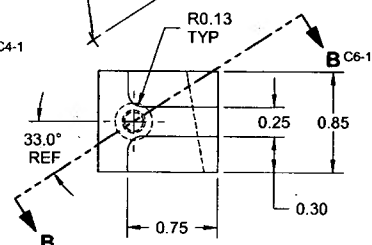
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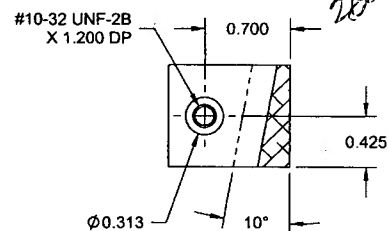
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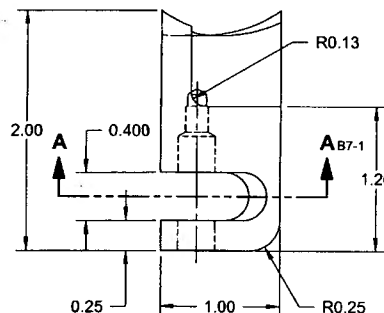
SECTION B-B C4-1



SECTION B-B C6-1



SECTION A-A B4-1



B67-43001-277 CONTOURED MALE EYE

NOTES:

- 1) MATERIAL: M6061-T6 (OR 6061-T651/T6510/T6511/T62) BAR
PER AMS-QQ-A-225/8 (OR AMS 4117/4128/4115/4116) OR
PER AMS-QQ-A-200/8 (OR AMS 4160)
REF. DART SPEC. M6061T6B
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.09 lbs

RELEASED
2009-09-24
NO

C	REDRAWN PREMIER AVIATION DRAWING IAW DART QSI 018 AND QSI 043. FOR PREVIOUS REVISIONS, REFER TO PAGE 20 OF PREMIER AVIATION DRAWING No. B67-43001. REASON: SEE PAR#09-011.	MB	09.02.24
REV.	DESCRIPTION	BY	DATE
DESIGN	RW		
DRAWN			
CHECKED	AS		
MFG. APPR.			
APPROVED			
DE APPR.	N/A		
DATE	09.02.24		

DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO.
B67-43001-277

REV. C
SHEET 1 OF 1

TITLE
CONTOURED MALE EYE

SCALE
NTS

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NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other